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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	
Filing Date	
First Named Inventor	ANDERSON, MARK
Title	ELECTRONIC MINIATURE TAG GAME
Art Unit	3713
Examiner Name	ROBERT Mendoza
Attorney Docket Number	

I hereby appoint:

Practitioners at Customer Number:

OR

Practitioner(s) named below:

Name	Registration Number
JONATHAN E. GRANT	34,830

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

The above-mentioned Customer Number:

OR

The address associated with Customer Number:

OR

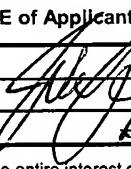
<input checked="" type="checkbox"/> Firm or Individual Name	JONATHAN E. GRANT / GRANT PATENT Services		
Address	2120 L Street, N.W. Suite 210		
Address			
City	WASHINGTON	State	DC Zip 20037
Country	USA		
Telephone	301-603-9071	Fax	301-603-9071

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	Mark Anderson	
Signature		
Date	August 16 '03	Telephone 508-769-6543

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of 2 forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

Declaration Submitted With Initial Filing

OR

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	
First Named Inventor	<u>ANDERSON, MARK</u>
COMPLETE IF KNOWN	
Application Number	
Filing Date	
Art Unit	<u>3713</u>
Examiner Name	<u>MENDOZA, ROBERT J</u>

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

"ELECTRONIC MINIATURE TAG GAME"

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? Yes	Certified Copy Attached? No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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DECLARATION — Utility or Design Patent ApplicationDirect all correspondence to: Customer Number: _____ OR Correspondence address below

Name

Jonathan Grant / Grant Patent Services

Address

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301-603-9071

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

 A petition has been filed for this unsigned inventorGiven Name
(first and middle [if any])

Sean

Family Name
or Surname

Anderson

Inventor's
Signature

Sean Anderson

Date

August 16 '03

Residence: City

Westborough

State

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Country

US

Citizenship

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Mailing Address

3 Olde Meetinghouse Road

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State

MA

ZIP

01581

Country

USA

NAME OF SECOND INVENTOR:

 A petition has been filed for this unsigned inventorGiven Name
(first and middle [if any])

Mark

Family Name
or Surname

Anderson

Inventor's
Signature

Date

August 16 '03

Residence: City

Westborough

State

MA

Country

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Citizenship

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Mailing Address

3 Olde Meetinghouse Road

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State

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ZIP

01581

Country

USA

Additional inventors or a legal representative are being named on the supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.

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DECLARATION**ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 1****Name of Additional Joint Inventor, if any:** A petition has been filed for this unsigned inventor**Given Name***Matthew***Family Name or Surname***Von-Maszewski***Inventor's Signature***August 16 '03***Residence: City***Westborough***State** MA**Country** USA**Citizenship** USA**Mailing Address***2 Rev. Thomas Hooker Road***Mailing Address***Westborough***City****State** MA**ZIP** 01581**Country***USA***Name of Additional Joint Inventor, if any:** A petition has been filed for this unsigned inventor**Given Name****Family Name or Surname****Inventor's Signature****Date****Residence: City****State****Country****Citizenship****Mailing Address****Mailing Address****City****State****ZIP****Country****Name of Additional Joint Inventor, if any:** A petition has been filed for this unsigned inventor**Given Name****Family Name or Surname****Inventor's Signature****Date****Residence: City****State****Country****Citizenship****Mailing Address****Mailing Address****City****State****ZIP****Country**

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.